

# Raising Clark County – Community Survey

## ABOUT THIS SURVEY:

**Every child is filled with promise.** Our community has a shared responsibility to foster this potential. The information collected by this survey will help to identify ways we can support families with young children so they can thrive. This survey is a community effort coordinated by Clark County Public Health.

**This survey is for** teens and adults who are pregnant or raising babies and young children in Clark County, WA. This may include, for example: **parents, co-parents, adoptive parents, kinship care providers, foster parents, guardians, grandparents, etc.**

**This survey includes** five main questions and eight short demographic questions that will help us understand our community better. Your answers are anonymous (we won't know who you are). Your participation is voluntary. You may choose to skip a question. However, your participation is important and meaningful.

**Thank you** for sharing your ideas about raising young children in Clark County!

**Contact us:** [RaisingClarkCounty@clark.wa.gov](mailto:RaisingClarkCounty@clark.wa.gov)

**If you prefer to record your answers instead of writing them, please call our voicemail box and follow the directions: 564-397-8111**

**If you prefer to type, please take the survey online:**



**<https://www.surveymonkey.com/r/RaisingClarkCo>**

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Which of the following describe you? (Select all that apply to you)

- ☐ I am currently pregnant
- ☐ My partner is currently pregnant
- ☐ I am raising^ one or more children ages 5 and under
- ☐ I am raising^ one or more children ages 6-8
- ☐ None of the above describe me\*\*\*

^This includes biological parent, co-parent, step-parent, adoptive parent, grandparent/relative, kinship care provider, guardian, foster parent, or anyone else raising a child

\*\*\*None of the above describe me: Thank you for your interest in taking this survey. You do not meet the survey criteria (currently expecting or raising a child ages 8 or under). We thank you for your time - have a great day!

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Your answers are anonymous (we won't know who you are). Your participation is voluntary. You may choose to skip a question. **However, your participation is important and meaningful.** Please write as much as you would like.

1. Where do you turn for trusted advice, information, or guidance around raising children?

*For example, about parenting, your child's health and development, prenatal care, access to services and supports, etc.*

2. Think of supports that have helped you while expecting or raising your children. What supports **work well** for your family in Clark County?

*Examples of types of supports: support from your employer, a local or national law, a service that you use, care that you or your child are provided, a program that you are a part of, a resource you like, an organization that supports you and your children, or another type of support that works well for you.*

*If you need more space for any questions, flip to last page to continue writing.*

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3. Think of supports you need while expecting or raising your children. What supports are **missing**, **have barriers**, or are **hard to access** for your family in Clark County? Please describe barriers you have experienced.

*Examples of types of supports: support from your employer, a local or national law, a service, care that you or your child are provided, a program, a resource, an organization, or another type of support that is missing or hard to access.*

4. What overwhelms you, **stresses you out**, or creates fear when you think about raising children here?

5. What are some of the **hopes and dreams** you have for your children?

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Your answers are anonymous (we won't know who you are). Your participation is voluntary. You may choose to skip a question. **However, your participation is important and meaningful.** This will help us understand the needs of the diversity of people in Clark County.

## 1. What is your zip code?

- |                                |                                |  |
|--------------------------------|--------------------------------|--|
| <input type="checkbox"/> 98601 | <input type="checkbox"/> 98663 | <input type="checkbox"/> 98685                           |
| <input type="checkbox"/> 98604 | <input type="checkbox"/> 98664 | <input type="checkbox"/> 98686                           |
| <input type="checkbox"/> 98606 | <input type="checkbox"/> 98665 | <input type="checkbox"/> I live in Cowlitz County (WA)   |
| <input type="checkbox"/> 98607 | <input type="checkbox"/> 98671 | <input type="checkbox"/> I live in Skamania County (WA)  |
| <input type="checkbox"/> 98629 | <input type="checkbox"/> 98674 | <input type="checkbox"/> I live in Multnomah County (OR) |
| <input type="checkbox"/> 98642 | <input type="checkbox"/> 98675 | <input type="checkbox"/> I live in Columbia County (OR)  |
| <input type="checkbox"/> 98660 | <input type="checkbox"/> 98682 | <input type="checkbox"/> None of the above               |
| <input type="checkbox"/> 98661 | <input type="checkbox"/> 98683 |  |
| <input type="checkbox"/> 98662 | <input type="checkbox"/> 98684 |  |

## 2. How do you identify your race and ethnicity? (Select all that apply to you)

- ☐ American Indian or Alaska Native
- ☐ Asian or Asian American
- ☐ Black or African American
- ☐ Hispanic or Latino
- ☐ Middle Eastern or North African
- ☐ Native Hawaiian or Pacific Islander (for example, Guam, Samoa, Fiji, Federated States of Micronesia, etc.)
- ☐ White
- ☐ Prefer not to answer
- ☐ Another race or ethnicity not listed above: \_\_\_\_\_

## 3. Please enter your specific ethnicities here. For example, Chamorro, Ukrainian, Mexican American, Cowlitz Indian Tribe, Tongan, Vietnamese, Chuukese, et al.

\_\_\_\_\_

# Raising Clark County – Community Survey

4. How do you identify your gender?

- ☐ Female
- ☐ Non-binary
- ☐ Male
- ☐ Prefer not to answer
- ☐ Prefer to self describe: \_\_\_\_\_

5. How many children are you raising?

Age 5 and under? \_\_\_\_\_

Age 6 and over? \_\_\_\_\_

6. How would you describe your income level?

- ☐ Low Income
- ☐ Lower-Middle Income
- ☐ Middle Income
- ☐ Upper-Middle Income
- ☐ High Income
- ☐ Prefer not to answer
- ☐ Prefer to self describe: \_\_\_\_\_

7. Please choose your age from the categories below:

- ☐ Under 20
- ☐ 20-29
- ☐ 30-39
- ☐ 40-49
- ☐ 50+
- ☐ Prefer not to answer

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8. How would you describe the individual(s) **primarily** responsible for raising your children? (Select all that apply to you)

- |  |   |
|--|---|
| <input type="checkbox"/> Single parent             | <input type="checkbox"/> Grandparent            |
| <input type="checkbox"/> Two parents – married     | <input type="checkbox"/> Extended family member |
| <input type="checkbox"/> Two parents – not married | <input type="checkbox"/> Guardian               |
| <input type="checkbox"/> LGBTQ+ parent             | <input type="checkbox"/> Foster parent          |
| <input type="checkbox"/> More than two parents     | <input type="checkbox"/> Kinship care provider  |
| <input type="checkbox"/> Step-parent               | <input type="checkbox"/> Prefer not to answer   |
| <input type="checkbox"/> Prefer to self describe:  |   |

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*Please write below and on the back of this page if you need more space for any questions.*